									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								}	10665781				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			18	18				RATE	FEE	7	RATE	FEE	
FOR			NUMBER	NUMBER FILEO		NUMBER EXTRA		BASIC FEE 385.00		OB	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			18 minus 20=		• _			X\$ 9=	1	OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		•	'		X43= 43		٦	X86=		
М	ALTIPLE DEPE	NDENT CLAIM F	RESENT					+145=		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	+	OR	+290=			
CLAIMS AS AMENDED - PART II											OTHER	THAN	
_	(Column 1) (Column 2) (Column 3)							SMALL ENTITY			SMALL		
IENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	SER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	9 1	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	1. 15	Minus		9	•		X\$ 9≃		OR	X\$18=		
	Ind pendent	1. 4	Minus	***	3_	·/		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 	7	.000		
							l	+145=		OR	+290=		
١.	-25-05						1	ADDIT. FEI		JOR.	ADDIT. FEE		
	<i></i>	(Column 1)		(Colum		(Column 3)			1 :==:				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	· ·	RATE	ADDI- TIONAL FEE	
	Total	. 10	Minus	-2	0	·		X\$ 9=		OR	X\$18=		
¥	Independent FIRST PRESE	NTATION OF MI	Minus	ENDENT	CLAIM		1	X43=		ОЯ	X86=		
								+145=		OR	+290=		
								TOTAL		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)									_ ,	ADDIT. FEEL		
Z -		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	•	Minus	**		=	t	X\$ 9=	 	1_	X\$18=	FEE	
	independent	•	Minus	, ,,,			F			OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43=	ļ. <u>.</u>	OR	X86=		
	H the enter is not and to be an									OR	+290=	1	
11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3."								· -	OR	TOTAL		
Tì	ue "Highest Num ie "Highest Num	nber Previously Paid ber Previously Paid	d For' IN THIS For' (Total or	SPACE is it Independent	ess than i) is the l) 3, enter "3." highest number		OIT, FEE d in the ap	propriate bo		DDIT. FEE L mn 1.		